PART B - FEE(S) TRANSMITTAL

ì	13	EB 2 1 2006 #		or <u>Fa</u>	Commissioner fo P.O. Box 1450 Alexandria, Virg	r Patents inia 22313-1450	nould be completed where correspondence address as		
Ī	maintenance fee notification CURRENT CORRESPONDENC	SE ADDRESS (Note: Use Block 1 for		specifying a n		mailing can only be used for secretificate cannot be used for lapper, such as an assignme of mailing or transmission.			
2/2	DANN, DORFMAN, HERRELL & SKILLMAN 1601 MARKET STREET SUITE 2400 PHILADELPHIA, PA 19103-2307 22/2006 JBALINA2 00000040 10721120				I hereby certify that the States Postal Service waddressed to the Mail transmitted to the USP	Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. Joan Rodgers (Depositor's name)			
2 F	FC:2501 700.00 OP FC:1504 300.00 OP FC:8001 30.00 OP				Februa	an Rodge 17, 2008	(Signature)		
ſ	APPLICATION NO.	FILING DATE	1	FIRST NAMED I	NVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
_	10/721,120	11/24/2003	•	Schaad Ru	udo!i	0036-P03321US00	6161		
,					LEASABLY ATTACHABLE	· · · · · · · · · · · · · · · · · · ·			
L	APPLN. TYPE	SMALL ENTITY	ISSUE FE	:E	PUBLICATION FEE	TOTAL FEE(S) DUE \$1000	03/16/2006		
	nonprovisional	YES	\$700		\$300	21000	V3/10/2000		
L	EXAMINER		ART UNIT		CLASS-SUBCLASS				
_	STORMER, RUSSELL D		3617		301-036100				
Ċ	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON The Address of the Printed On The Pto/SB/47 (State of the Pto/SB/47) (State of the Pto/SB/4								
3	3. ASSIGNEE NAME AND		PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
3	3. ASSIGNEE NAME AND		elow, no assignee of this form is NOT	ata will appear	r on the patent. If an assign r filing an assignment.	ee is identified below, the d	ocument has been filed for		
3	3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN	an assignee is identified be a 37 CFR 3.11. Completion EE	(B		: (CITY and STATE OR COL	JNTRY)	ocument has been filed for		
3	3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN	an assignee is identified be 137 CFR 3.11. Completion	(B			JNTRY)	ocument has been filed for		
F	B. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac	an assignee is identified by 37 CFR 3.11. Completion EE d AG Raderfabri e assignee category or category	(B .k ries (will not be pri) RESIDENCE:	: (CITY and STATE OR COU Subingen, Swit ent): ☐ Individual ☑ Co	UNTRY) zerland			
F	3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac	an assignee is identified by 37 CFR 3.11. Completion EE d AG Raderfabri e assignee category or category	(B .k ries (will not be pri	nted on the pate. Payment of Fe	ent): Individual Coe(s): the amount of the fee(s) is en	UNTRY) zerland proporation or other private gro			
F	ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac Please check the appropriate The following fee(s) are Issue Fee Publication Fee (No see	an assignee is identified by 137 CFR 3.11. Completion EE d AG Raderfabri e assignee category or categorenclosed: small entity discount permitte	(B .k ries (will not be pri	nted on the pate Payment of Fe A check in Payment by	ent): Individual Coes. Individual Coes. Co	UNTRY) Zerland proporation or other private gro closed. is attached.	oup entity Government		
F	ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac Please check the appropriate The following fee(s) are	an assignee is identified by 137 CFR 3.11. Completion EE d AG Raderfabri e assignee category or categorenclosed: small entity discount permitte	(B .k ries (will not be pri	nted on the pate Payment of Fe A check in Payment by	ent): Individual Coe(s): the amount of the fee(s) is en	UNTRY) Zerland proporation or other private gro closed. is attached.	oup entity Government		
F 4	ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution Advance Order - # of Change in Entity Status a. Applicant claims S	an assignee is identified by 137 CFR 3.11. Completion EE d AG Raderfabri e assignee category or categorenclosed: small entity discount permitter f Copies (from status indicated above MALL ENTITY status. See	ries (will not be prided) ed) 37 CFR 1.27.	nted on the pate Payment of Fe A check in Payment by The Director Deposit Accou	ent): Individual Coese(s): the amount of the fee(s) is ency credit card. Form PTO-2038 or is hereby authorized by clant Number 04-1406	UNTRY) Zerland Orporation or other private gro closed. B is attached. harge the required fee(s), or (enclose an extra country status. See 37 Cl	credit any overpayment, to opy of this form).		
F 4	ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution Advance Order - # of Change in Entity Status a. Applicant claims S	an assignee is identified by 137 CFR 3.11. Completion EE d AG Raderfabri e assignee category or categorenclosed: small entity discount permitter f Copies (from status indicated above MALL ENTITY status. See	ries (will not be prided) ed) 37 CFR 1.27.	nted on the pate Payment of Fe A check in Payment by The Director Deposit Accou	ent): Individual Content): Individual Content): Individual Content): Content in Individual Content in Individu	UNTRY) Zerland Orporation or other private gro closed. B is attached. harge the required fee(s), or (enclose an extra country status. See 37 Cl	credit any overpayment, to opy of this form).		
F 4	ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth ir (A) NAME OF ASSIGN Gebr. Schaac Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution Advance Order - # of Change in Entity Status a. Applicant claims S	an assignee is identified by 137 CFR 3.11. Completion EE d AG Raderfabri e assignee category or categorenclosed: small entity discount permitter f Copies (from status indicated above MALL ENTITY status. See	ries (will not be prided) ed) 37 CFR 1.27.	nted on the pate Payment of Fe A check in Payment by The Director Deposit Accou	cets: (CITY and STATE OR COUNTY Subingen, Swittent): Individual States Cets: the amount of the fee(s) is ency credit card. Form PTO-2038 or is hereby authorized by clant Number 04-1406 onto re-apply any previously ther than the applicant; a region of the subject of the subjec	UNTRY) Zerland Orporation or other private gro closed. B is attached. harge the required fee(s), or (enclose an extra country status. See 37 Cl	credit any overpayment, to opy of this form). FR 1.27(g)(2). tion identified above. he assignee or other party in		

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

DANN, DORFMAN, HERRELL AND SKILLMAN

A PROFESSIONAL CORPORATION

1601 MARKET STREET · SUITE 2400 · PHILADELPHIA, PA · 19103-2307 PHONE (215) 563-4100 · FAX (215) 563-4044

February 17, 2006

Last Name of First Named Inventor:

MAIL STOP ISSUE FEE

SCHAAD

Application No. 10/721,120

Allowed: December 16, 2005

Attorney Docket No. 0036-P03321US00

Filed: November 24, 2003

Confirmation No: 6161

For: Attachment Device For An

Auxiliary Wheel Releasably Attachable To A Wheel Of A

Vehicle

TO THE COMMISSIONER FOR PATENTS:

NOTIFICATION OF FEE ADDRESS

Please enter "Payor Number" No. 000110 in the Office records to identify the "Fee Address" to be used in connection with this case for all future maintenance fee payments and related correspondence.

Respectfully submitted,

Henry H. Skillman

PTO Registration No. 17,352

Telephone:

215-563-4100

Facsimile:

215-563-4044



DANN, DORFMAN, HERRELL AND SKILLMAN

A PROFESSIONAL CORPORATION

1601 MARKET STREET · SUITE 2400 · PHILADELPHIA, PA · 19103-2307 PHONE (215) 563-4100 · Fax (215) 563-4044

February 17, 2006

Last Name of First Named Inventor:

MAIL STOP ISSUE FEE

SCHAAD

Application No. 10/721,120

Allowed: December 16, 2005

Attorney Docket No. 0036-P03321US00

Confirmation No: 6161

Filed: November 24, 2003

For: Attachment Device For An

Auxiliary Wheel Releasably Attachable To A Wheel Of A

Vehicle

TO THE COMMISSIONER FOR PATENTS:

SUBMISSION OF ISSUE FEE

The above-identified application has been allowed. In response to the Notice of Allowability dated December 16, 2005, enclosed are the following:

- 1. A copy of form PTOL-85 with authorization to charge Deposit Account No. 04-1406.
- 2. Fee Transmittal Sheet
- 3. Check in the amount of \$1030, which includes the issue fee, the publication fee and the cost of ten (10) advance copies.
- 4. Notification of Fee Address

Respectfully submitted,

DANN, DORFMAN, HERRELL AND SKILLMAN A Professional Corporation Attorneys for Applicants

Henry H. Skillman

By

PTO Registration No. 17,352

, 5		Complete if known	
		Application Number: 10/721,120	
	FEE TRANSMITTAL	Filing Date: November 24, 2003	
	E	First Named Inventor: SCHAAD	
	(E FEB 2 1 2006 D	Group Art Unit: 3617	
•	THE STATE OF THE S	Examiner Name: Stormer, Russell	
	Total Amt. of Payment: (2)+(3)= \$1,030	Attorney Docket Number: 0036-P03321US00	

METHOD OF PAYMENT (check one)	FEE CALCULATION (continued)		
	ADDITIONAL FEES		
The Commissioner is hereby authorized to:	Fee Description Fee Paid		
[] Charge indicated fees	Surcharge-late filing fee or oath		
[X] Charge additional fees	Surcharge - late provisional filing fee or cover sheet		
[X] Credit overpayments	Extension for response within first month		
to the account of DANN, DORFMAN, HERRELL & SKILLMAN	Extension for response within second month		
Deposit Account Number 04-1406	Extension for response within third month		
·	Extension for response within fourth month		
2. Payment enclosed:	Notice of Appeal		
Check in the amount of \$1,030	Filing a brief in support of an appeal		
	Request for oral hearing		
FEE CALCULATION	Petition to revive unavoidably abandoned application		
1. FILING FEE Fee	Petition to revive unintentionally abandoned application		
Fee Description	Issue fee 700		
Utility filing fee	Petitions to the Commissioner		
Design filing fee	Petitions related to provisional applications		
Plant filing fee	Submission of Information Disclosure Stmt.		
Reissue filing fee	Recording each patent assignment per property		
Provisional filing fee	Other fee (specify) Advance Order (10 copies) 30		
	Other fee (specify) Publication Fee 300 Publication Fee		
SUBTOTAL (1)\$0			
	SUBTOTAL (3)\$1,030		
	1		
2. Claims			
Paid Extr Fee			
Total Claims = 0			
Independent Claims x = 0			
Multiple Dependent			
(First presentation)			
SUBTOTAL (2)			

Submitted By: Typed or			
Printed Name	Henry H. Skillman	Reg. Number 17,352	Denseit Assesset Lleas ID
Signature	Willelann,	Date February 17, 2006	Deposit Account User ID 04-1406